II

DORE AND BREDWARDINE RURAL DISTRICT COUNCIL

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1971

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Introduction

To the Chairman and Members of the Council

Mr. Chairman and Members,

I beg to present the Annual Report of the Medical Officer of Health for the year 1971.

In the Report will be found comment on vital statistics and environmental health of the District. In the Introduction it is proposed to discuss the most important physical disease affecting the developed nations.

Overweight

McMullen and Hopkins found that 18.0% and 17.4% respectively of patients visiting them in general practice were overweight according to subjective impression, that is the normal curves and angles of the figure had gone and it was distorted. Pincherle and Wright found that among the first 2000 people visiting their clinic at the Institute of Directors for a check-up, 19% were between 10 and 20% overweight and 9% more than 20% overweight. In Ross on Wye out of a group of 69 boys and 72 girls at the Grammar School, 9 boys and 4 girls who were overweight according to subjective impression, that is 13.0% of boys and 5.6% of girls, were found to be more than 30% above standard weights given by the Institute of Child Health. Out of groups of 173 boys and 180 girls at the Secondary Modern School, 9 boys and 15 girls who were overweight according to subjective impression, that is 5.2% of boys and 8.3% of girls, were found to be more than 30% above the standard weights. One boy was 150% and one girl 100% above the standard weights. Out of a group of 29 children at a local primary school, 5 who were overweight according to subjective impression, that is 17.2% of the group, were found to be more than 30% above the standard weights. These findings are particularly distressing as according to Brooke four out of five overweight children are likely to become overweight adults.

Overweight is not a funny matter. Figures from the Societyof Actuaries of America indicate that for persons aged 15 - 69 who are 10%, 20% and 30% above the weights at which mortality is lowest, mortality is 13%, 25% and 42% respectively above average in men, and 9%, 21%, and 30% respectively above average in women. Figures from the same source indicate that for persons aged 15 - 69 who are 30% above the weights at which mortality is lowest, mortality from heart disease, other than coronary disease, and from circulatory disease, is 43% higher in men and 51% higher in women, from coronary disease 34% higher in both sexes, from stroke 53% higher in men and 28% higher in women, from cancer 16% higher in men and 13% higher in women, from diabetes 133% higher in men and 83% higher in women, from pneumonia and influenza 32% higher in men and 27% higher in women, and from diseases of the digestive system 68% higher in men and 39% higher in women.

A 12 year study of 5000 men and women by Kannel and others indicated that the weight before the onset of angina pectoris or of sudden death from angina pectoris was strongly related to the risk of these, and it was suggested that the relationship of overweight to increased incidence of coronary disease was due to increased cardiac workload and raised blood pressure resulting from excess weight, increased coronary atherosclerosis resulting from high food intake and consequent high levels of fats in the circulation, and deficient development of collateral coronary circulation in coronary patients resulting from decrease in physical activity due to overweight

Huenemann has shown that rates of coronary disease, high blood pressure, cardiovascular renal disease, and diabetes, are all higher among those who were markedly overweight in childhood, and Emerson that women who are overweight when they become pregnant are more likely to develop toxaemia of pregnancy, high blood pressure, and a number of other complications. Overweight people have an unusually high incidence of gallstones.

Overweight predisposes also to mechanical complications, to the effect on joints and ligaments of carrying too much weight, such as backache, arthritis of the knees and hips, and flat foot. Excess fat round the trunk is an obstruction to free breathing, and chronic bronchitis is a common association. Abdominal surgery is more difficult, ventral hernia is a further complication, varicose veins are more common, and overweight people are slower in their movements and prone to accidents.

The great majority of overweight people are overweight because their intake of food is in excess of physiological requirements, in other words because they eat too much, and it might as well be pointed out here that alcohol, while deficient in proteins, fats, vitamins, and minerals, is not deficient in calories. Anybody who is overweight is eating too much, or drinking too much, or both. Some people have the capacity to burn off excess food, converting it into heat, and are able to eat to excess without putting on weight, but in the majority of people excess food is converted into fat and stored in the body. The simple proposition that overweight is due to overeating cannot be repeated too often. However little a person is eating, if he is overweight, he is eating too much. The fact that the man next door, who eats twice as much, is not overweight, has no relevance. It is what he himself eats that matters.

It is particularly distressing that the majority of babies are overweight, and that this majority is steadily increasing. Weight gain seems to be the mother's favourite measure of her baby's progress, possibly just because it is the easiest to measure, but there is also the visual evidence which it provides of her capacity as a mother, and perhaps even now there is the memory of consumption and phthisis. The majority of babies are bottle fed, and this majority also is increasing, and the supply of baby food, unlike the supply of breast milk, is unlimited, and leads to overfeeding, as does the indigestion caused by bottle feeding, which is mistaken for hunger. Increasingly children are overfed almost from the beginning, with possible permanent cellular changes in adipose tissue composition which may explain the poor prognosis of childhood obesity, and also possible changes in the appetite control mechanism in the brain.

If the cause of overweight is simple, its treatment also is simple, in theory at any rate. First the weight has to be reduced to within normal limits, by the use of a diet which provides less calories than the individual requires, and then it has to be maintained within these limits by the use of a regime which provides no more calories than the individual requires. The individual must accept that it is desirable that he should lose weight, so that he will be willing to follow the diet, and he must accept also that if he does not thereafter follow a regime which will provide him with no more calories than he requires he will enevitably put on weight again. The difficulty that people experience in losing weight, and in maintaining their weight within normal limits once it has reached them, is because they are not prepared to exercise the self-control required.

A diet containing unrestricted amounts of protein and fat, but no carbohydrate, is not difficult to follow, as all the body's nutritional requirements are contained in the protein and fat, and even in the absence of carbohydrate, or possibly particularly in the absence of carbohydrate, no instinctive demands are made by the body, the amount of protein and fat consumed is self-limiting, and there are no uncontrollable desires for food by the individual. But he must be perfectly clear that he is never eating more than is strictly necessary to control his hunger. In general small frequent meals are less likely to lead to uncontrollable hunger than larger meals at wider intervals. A diet of this nature, rigidly followed, having obtained its objective, can then be gradually modified to become the basis of a maintenance regime. Exercise essential for health, reduces weight very little. It stimulates appetite, and in any case the body is an efficient machine needing little fuel.

The problem of overweight babies and children is in some ways more difficult. The baby which the mother seems to want, and which is praised by her relatives and friends, and by too many members of the nursing profession who should know better, is the baby which by any scientific assessment is overweight and heading straight for the disasters already enumerated, even if these are still some way off. It is the climate of opinion that has to be changed. To a lesser extent this is true of the older child, or at any rate the mother is not prepared to admit that her child is less than perfect, and so not prepared to do anything about it.

Overweight is the most important physical disease affecting this country and the other developed nations, and it is not receiving the attention it warrants.

I am,
Your obedient Servant,
JOHN SLEIGH

Medical Officer of Health

Dore and Bredwardine Rural District

The Black Mountain Foothills

To the south of the Wye the foothills of the Black Mountains occupy an area of some 100 square miles and represent the less elevated eastern fringe of the main Black Mountain mass which extends into the adjoining counties of Brecon and Monmouth. Over much of the area the rocks are horizontal or only slightly inclined. The various rocks possess differing degrees of resistance, and erosion produces a markedly tabular relief.

The whole region is slightly tilted to the south east, so that the loftiest hills occur on the northern and western fringes. Marbach Hill, overlooking the Wye, rises to over 1,000 feet, Cusop Hill in the north west exceeds 1,300 feet, while along the Breconshire border the high moorland exceeds 2,000 feet. Elsewhere in these uplands few summits rise above the 1,000 feet level, and the topography is that of a pleasantly rolling plateau, with a general elevation of some 600 to 1,000 feet, deeply trenched by the parallel valleys of the Olchon, Escley Brook, Upper Monnow, Dulas and Dore.

These five valleys dominate the human pattern of the region. Agriculturally they are more favoured than the bleaker uplands, and their lower structures rival in fertility the richest parts of the lowlands. They affect even more markedly the orientation of the region. Movement from east to west is effectively hampered by their deeply trenched courses, and the main routeways run NNW - SSE in conformity with the grain of the region. As a consequence the economic life of the valleys tends to focus on the town of Abergavenny lying outside the county, though a break in the hills to the east of the Golden Valley (the valley of the Dore) causes this, the most easterly of the five valleys, to be more closely connected with Hereford.

The Lowlands

These are floored mainly by red marls, giving a heavy and close textured loamy soil. The consist of an undulating river-fretted lowland ranging in elevation from 200 to 400 feet and are set within a discontinuous frame of hills. Over much of the region the red marls are masked by extensive spreads of glacial drift, ranging in character from comparatively heavy clay to lighter sands and gravels. These gravels are particularly important to agriculture and water supply.

The Wye Valley

The Wye is almost entirely lowland in its affinities. Its physical conditions consist of a lazily meandering stream, fringing stretches of alluvium liable to flood, and discontinuous spreads of terrace gravel. Its economic significance is fourfold. It serves as a routeway, as a source of water supply, as a centre of attraction for holiday makers and fishermen, and it is an important element in the agricultural economy of the District.

The South Eastern Hills

These have a generally subdued relief which is frequently tabular in form. They represent the upturned western edge of the sandstone covering of South Herefordshire.

Section A

Statistics and Social Conditions of the Area

Dore R.D.

General Statistics

	Dore RD 1970	Dore RD 1971	E & W 1971
Area in acres	84,532	84,532	
Registrar General's estimate of home population, mid-year	7,710	7,170	48,815,000
Number of inhabited houses (end of year) according to Rate Books	2,469	2,532	
Rateable Value	£166,512	£164,736	
Live births			
Number	91	125	783,165
Rate per 1000 population	11.8	17.4	16.0
Illegitimate live births per cent of total live births	8.8	4.8	8.4
Stillbirths			
Number	2	2	9,898
Rate per 1000 total live and still births	21.5	15.7	12.5
Total live and still births	93	127	793,063
Infant deaths (deaths under 1 year)	1	1	13,726
Infant mortality rates			
Total infant deaths per 1000 total live births	11.0	8.0	17.5
Legitimate infant deaths per 1000 total legitimate live births	12.0	8.4	16.9
Illegitimate infant deaths per 1000 total illegitimate live births	0.0	0.0	24.2
Neonatal mortality (deaths under 4 weeks per 1000 total live births)	11.0	8.0	11.6
Early neonatal mortality (deaths under 1 wwek per 1000 total live births)	0.0	0.0	9.9
Perinatal mortality (stillbirths and deaths under 1 week combined per 1000 total live and still births)	21.5	15.7	22.3
Maternal mortality (including abortion)			
Number of deaths	1	0	133
Rate per 1000 total live and still births	10.80	0.00	0.17
Deaths			
Number	86	83	567,345
Rate per 1000 population	11.2	11.6	11.6

South Herefordshire

General Statistics

	Sth Hfds 1970	Sth Hfds 1971	E & W 1971
Area in acres	208,264	208,264	
Registrar General's estimate of home population, mid-year	37,380	36,290	48,815,000
Number of inhabited houses (end of year) according to Rate Books	12,719	12,853	
Rateable Value	£1,058,567	£1,066,102	
Live births			
Number	483	509	783,165
Rate per 1000 population	12.9	14.0	16.0
Illegitimate live births per cent of total live births	5.6	6.5	8.4
Stillbirths			
Number	7	4	9,898
Rate per 1000 total live and still births	14.3	7.8	12.5
Total live and still births	490	513	793,063
Infant deaths (deaths under 1 year)	4	10	13,726
Infant mortality rates			
Total infant deaths per 1000 total live births	8.3	19.6	17.5
Legitimate infant deaths per 1000 total legitimate live births	8.8	18.9	16.9
Illegitimate infant deaths per 1000 total illegitimate live births	0.0	30.3	24.2
Neonatal mortality rate (deaths under 4 weeks per 1000 total live births)	6.2	11.8	11.6
Early neonatal mortality rate (deaths under 1 week per 1000 total live births)	4.1	9.8	9.9
Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1000 total live and still births)	18.4	17.5	22.3
Maternal mortality (including abortion)			
Number of deaths	1	0	133
Rate per 1000 total live and still births	2.04	0.00	0.17
Deaths			
Number	442	458	567,345
Rate per 1000 population	11.8	12.6	11.6

Dore R.D.

Population Changes

Year	Population	Decrease	Increase	Births	Deaths	Natural Increase	Emigration	Immigration
1949	8589							
1950	8691		102	155	80	75		27
1951	8644	47		159	96	63	110	
1952	8389	255		150	85	65	320	
1953	8341	48		166	90	76	124	
1954	8340	1		137	72	65	66	
1955	8340			126	109	17	17	
1956	8320	20		143	70	73	93	
1957	8300	20		122	90	32	52	
1958	8300			114	93	21	21	
1959	8280	20		133	61	72	92	
1960	8310		30	135	91	44	14	
1961	7840	470		118	94	24	494	
1962	7890		50	145	72	73	23	
1963	7800	90		137	86	51	141	
1964	7750	50		128	92	36	86	
1965	7740	10		145	80	65	75	
1966	7740			122	89	33	33	
1967	7740			132	60	72	72	
1968	7820		80	127	91	36		44
1969	7750	70		108	68	40	110	
1970	7710	40		91	86	5	45	
1971	7170	540		125	83	42	582	

This table may be summarised as follows:

	Population Decrease		Births		Deaths		Natural Increase		Emigration	
	Total No.	Average Annual No.	Total No.	Average Annual No.	Total No.	Average Annual No.	Total No.	Average Annual No.	Total No.	Average Annual No.
50-59	309	30.9	1405	140.5	846	84.6	559	55.9	868	86.8
60-69	530	53.0	1297	129.7	823	82.3	474	47.4	1004	100.4
50-69	839	42.0	2702	135.1	1669	83.5	1033	51.7	1872	93.6
1970		40		91		86		5		45
1971		540		125		83		42		582

The following comments may be made on this Summary table:

During the period 1950-59 the population of Dore and Bredwardine Rural District decreased by 309 from 8,589 to 8,280, as a result of an excess of 559 births over deaths and a net emigration of 868. During the period 1960-69 the population of Dore and Bredwardine Rural District decreased by 530, from 8,280 to 7,750, as a result of an excess of 474 of births over deaths and a net emigration of 1,004. During the period 1950-69 the population of Dore and Bredwardine Rural District decreased by 839 from 8,589 to 7,750, as a result of an excess of 1,033 of births over deaths and a net emigration of 1,872. There has been an excess of births over deaths in every one of the twenty years but in spite of this the population has fallen in twelve out of the twenty, as a result of a net emigration in every year except two. This is a disastrous rate of depopulation. It is not the births which are lacking. Births are more than adequate to maintain the population and an increase in the number of births will only result in an increase in the volume of emigration. The fault is the inability of the District to retain its population, and as can be seen from the figures taking the two ten year periods with one another, the volume of emigration is increasing.

South Herefordshire

Population Changes

Year	Population	Decrease	Increase	Births	Deaths	Natural Increase	Emigration	Immigration
1949	38379							
1950	38281	98		639	472	167	265	
1951	38020	261		678	502	176	437	
1952	37750	270		654	444	210	480	
1953	37817		67	637	461	176	109	
1954	38010		193	575	444	131		62
1955	37950	60		581	482	99	159	
1956	37830	120		601	458	143	263	
1957	37740	90		570	458	112	202	
1958	37760		20	586	456	130	110	
1959	37750	10		564	436	128	138	
1960	37810		60	609	464	145	85	
1961	36300	1510		575	483	92	1602	
1962	36580		280	608	439	169		111
1963	36610		30	615	460	155	125	
1964	37010		400	615	438	177		223
1965	37280		270	587	416	171		99
1966	37420		140	584	436	148	8	
1967	37640		220	572	394	178		42
1968	37620	20		532	441	91	111	
1969	37560	60		556	469	87	147	
1970	37380	180		483	442	41	221	
1971	36290	1090		509	458	51	1141	

This table may be summarised as follows:-

	Population Decrease		Births		Deaths		Natural Increase		Emigration	
	Total No.	Average Annual No.	Total No.	Average Annual No.	Total No.	Average Annual No.	Total No.	Average Annual No.	Total No.	Average Annual No.
1950-59	629	62.9	6085	608.5	4613	461.3	1472	147.2	2101	210.1
1960-69	190	19.0	5853	585.3	4440	444.0	1413	141.3	1603	160.3
1950-69	819	41.0	11938	596.9	9053	452.7	2885	144.3	3704	185.2
1970		180		483		442		41		221
1971		1090		509		458		51		1141

The following comments may be made on this Summary table:

During the period 1950-69 the population of South Herefordshire decreased by 629, from 38,379 to 37,750, as a result of an excess of 1,472 of births over deaths and a net emigration of 2,101. During the period 1960-69 the population of South Herefordshire decreased by 190, from 37,750 to 37,560, as a result of an excess of 1,413 of births over deaths and a net emigration of 1,603. During the period 1950-69 the population of South Herefordshire decreased by 819, from 38,379 to 37,560, as a result of an excess of 2,885 of births over deaths and a net emigration of 3,704. If the figures for Ross, which has a net immigration, probably from outside, are subtracted, the position is even worse. During the period 1950-59 the population of South Herefordshire excluding Ross decreased by 669, from 33,089 to 32,420, as a result of an excess of 1,479 of births over deaths and a net emigration of 2,148. During the period 1960-69 the population of South Herefordshire, excluding Ross, decreased by 1,430 from 32,420 to 30,990, as a result of an excess of 1,184 of births over deaths and a net emigration of 2,614. During the period 1950-69 the population of South Herefordshire, excluding Ross, decreased by 2,099, from 33,089 to 30,990, as a result of an excess of 2,663 of births over deaths and a net emigration of 4,762.

Dore R.D.

Births, Stillbirths and Infant Deaths

Live Births

	Male	Female	Total
Legitimate	64	55	119
Illegitimate	3	3	6
Total	67	58	125

Stillbirths

	Male	Female	Total
Legitimate		2	2
Illegitimate			
Total		2	2

Deaths of Infants under one year of age

	Male	Female	Total
Legitimate	1		1
Illegitimate			
Total	1		1

Deaths of Infants under four weeks of age

	Male	Female	Total
Legitimate	1		1
Illegitimate			
Total	1		1

Deaths of Infants under one week of age

	Male	Female	Total
Legitimate			
Illegitimate			
Total			

South Herefordshire

Births, Stillbirths and Infant Deaths

Live Births

	Male	Female	Total
Legitimate	257	219	476
Illegitimate	16	17	33
Total	273	236	509

Stillbirths

	Male	Female	Total
Legitimate	2	2	4
Illegitimate			
Total	2	2	4

Deaths of Infants under one year of age

	Male	Female	Total
Legitimate	6	3	9
Illegitimate	-	1	1
Total	6	4	10

Deaths of Infants under four weeks of age

	Male	Female	Total
Legitimate	3	3	6
Illegitimate			
Total	3	3	6

Deaths of Infants under one week of age

	Male	Female	Total
Legitimate	2	3	5
Illegitimate			
Total	2	3	5

Dore R.D.

Deaths

Cause of Death	Total All Ages		Under 4 Weeks		4 Weeks and under 1 Year		Age in Years 1-		5-		15-		25-		35-		45-		55-		65-		75 and over	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Other infective and parasitic diseases	1		1																					
Malignant neoplasm, oesophagus	1																		1					
Malignant neoplasm, stomach	1	2																			1	2		
Malignant neoplasm, intestine	3																1				1		1	
Malignant neoplasm, lung bronchus	3	1													1					1	2			
Malignant neoplasm, uterus		1														1								
Malignant neoplasm, prostate	1																						1	
Other malignant neoplasms	1																				1			
Diabetes mellitus		1																				1		
Chronic rheumatic heart disease		1																				1		
Hypertensive disease		2																		1		1		
Ischaemic heart disease	18	5															1		4		9	3	4	2
Other forms of heart disease	3	5																					3	5
Cerebrovascular disease	7	4																			3	1	4	3
Other diseases of circulatory system	2	1																		1			2	
Pneumonia	3	4															1						2	4
Bronchitis and emphysema	2	3																				2	2	1
Other diseases of respiratory system	1																				1			
Other diseases of digestive system		1																						1

Hyperplasia of prostate	1																						1	
All other accidents	1	2													1									2
Suicide and self inflicted injuries	1												1											
Total All Causes	50	33	1	-	-	-	-	-	-	-	-	-	1	-	2	1	3	-	5	3	18	11	20	18

South Herefordshire

Deaths

Cause of Death	Total All Ages		Under 4 Weeks		4 Weeks and under 1 Year		Age in Years																	
							1-		5-		15-		25-		35-		45-		55-		65-		75 and over	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Other infective and parasitic diseases	2		1		1																			
Malignant neoplasm oesophagus	4	1																	1		1		2	1
Malignant neoplasm stomach	8	3																			3	2	5	1
Malignant neoplasm intestine	5	3															1			1	2	1	2	1
Malignant neoplasm lung bronchus	13	4													1		1		3	2	5	2	3	
Malignant neoplasm breast		3																		1		1		1
Malignant neoplasm uterus		3														1				1		1		
Malignant neoplasm prostate	6																				1		5	
Leukaemia	1	1													1	1								
Other malignant neoplasms	10	10						1										1	3	4	4	2	3	2
Diabetes mellitus	2	4																		1	1	2	1	1
Anaemias	1	1																					1	1
Mental disorders		1																						1
Other diseases of nervous system	4	2															1	1	1	1	1		1	
Chronic rheumatic heart disease	3	4																		2	2	2	1	
Hypertensive disease	8	6																	3	2	4	2	1	2
Ischaemic heart disease	61	28													1		3		10	3	27	6	20	19
Other forms of heart disease	12	27																	1	1		2	11	24

Other diseases of circulatory system	13	6																		1	3		10	5
Influenza		1																				1		
Pneumonia	12	14															1		2			3	9	11
Bronchitis and emphysema	10	7																	1		4	2	5	5
Asthma	1																		1					
Other diseases of respiratory system	5	3			2								1								1		1	3
Peptic ulcer		2																				1		1
Intestinal obstruction and hernia	1																				1			
Cirrhosis of liver	2	1												1	1		1							
Other diseases of digestive system	1	3																				1	1	2
nephritis and nephrosis		1																				1		
Hyperplasia of prostate	1																						1	
Other diseases genito urinary system	1	6																		2		1	1	3
Diseases of musculo skeletal system	1	3														1			1			1		1
Congenital anomalies	1	4		1		1				1				1					1					
Birth injury difficult labour, etc.	1		1																					
Other causes of peri perinatal mortality	1	2	1	2																				
Symptoms and ill defined conditions	1	4																			1			4
Motor vehicle accidents	7										4		1		1						1			
All other accidents	7	9						1					1		2					1		1	4	6
Suicide and self inflicted injuries	4												1		1		1		1					
Total All Causes	246	212	3	3	3	1	-	2	-	1	4	-	4	2	8	3	9	4	34	27	73	43	108	126

Dore R.D.

Vital Statistics

	Births			Stillbirths			Infant Deaths			Maternal Deaths			Deaths		
	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate
1950	155	17.8	15.9	3	19.0	22.6	2	12.9	29.6	0	0.00	0.86	80	9.2	11.6
1951	159	18.4	15.5	3	18.5	23.0	6	37.7	29.7	0	0.00	0.75	96	11.1	12.5
1952	150	17.9	15.3	0	0.0	22.7	4	26.7	27.6	0	0.00	0.67	85	10.1	11.3
1953	166	19.9	15.5	1	6.0	22.4	3	18.1	26.8	0	0.00	0.71	90	10.8	11.4
1954	137	16.4	15.2	0	0.0	23.5	1	7.3	25.4	0	0.00	0.65	72	8.6	11.3
1955	126	15.1	15.0	4	30.8	23.2	5	39.7	24.9	0	0.00	0.60	109	13.1	11.7
1956	143	17.2	15.7	4	27.2	22.9	2	14.0	23.7	0	0.00	0.52	70	8.4	11.7
1957	122	14.7	16.1	5	39.4	22.5	5	41.0	23.1	0	0.00	0.45	90	10.8	11.5
1958	114	13.7	16.4	3	25.6	21.5	4	35.1	22.5	0	0.00	0.43	93	11.2	11.7
1959	133	16.1	16.5	4	29.2	20.8	5	37.6	22.2	0	0.00	0.38	61	7.4	11.6
1960	135	16.2	17.2	3	21.7	19.8	1	7.4	21.8	0	0.00	0.39	91	11.0	11.5
1961	118	15.1	17.6	5	40.7	19.0	2	16.9	21.4	0	0.00	0.34	94	12.0	11.9
1962	145	18.4	18.0	2	13.6	18.1	1	6.9	21.7	0	0.00	0.35	72	9.1	11.9
1963	137	17.6	18.2	4	28.4	17.2	4	29.2	21.1	0	0.00	0.28	86	11.0	12.2
1964	128	16.5	18.5	2	15.4	16.3	7	54.7	19.9	0	0.00	0.26	92	11.9	11.3
1965	145	18.7	18.1	0	0.0	15.8	8	55.2	19.0	0	0.00	0.25	80	10.3	11.5
1966	122	15.8	17.7	1	8.1	15.3	0	0.0	19.0	0	0.00	0.26	89	11.5	11.7
1967	132	17.1	17.2	3	22.2	14.8	1	7.6	18.3	0	0.00	0.21	60	7.8	11.2
1968	127	16.2	16.9	0	0.0	14.3	1	7.9	18.3	0	0.00	0.24	91	11.6	11.9
1969	108	13.9	16.3	2	18.2	13.2	1	9.3	18.1	0	0.00	0.19	68	8.8	11.9
1970	91	11.8	16.0	2	21.5	13.0	1	11.0	18.2	1	10.80	0.18	86	11.2	11.7
1971	125	17.4	16.0	2	15.7	12.5	1	8.0	17.5	0	0.00	0.17	83	11.6	11.6

This table may be summarised as follows:

	Births			Stillbirths			Infant Deaths			Maternal Deaths			Deaths		
	Dore Total No.	R.D. Av Ann Rate	E&W Av Ann Rate	Dore Total No.	R.D. Av Ann Rate	E&W Av Ann Rate	Dore Total No.	R.D. Av Ann Rate	E&W Av Ann Rate	Dore Total No.	R.D. Av Ann Rate	E&W Av Ann Rate	Dore Total No.	R.D. Av Ann Rate	E&W Av Ann Rate
50-59	1405	16.7	15.7	27	19.6	22.5	37	27.0	25.6	0	0.00	0.60	846	10.1	11.6
60-69	1297	16.6	17.6	22	16.8	16.4	26	19.5	19.9	0	0.00	0.28	823	10.5	11.7
50-69	2702	16.6	16.6	49	18.2	19.4	63	23.3	22.7	0	0.00	0.44	1669	10.3	11.7
1970	91	11.8	16.0	2	21.5	13.0	1	11.0	18.2	1	10.80	0.18	86	11.2	11.7
1971	125	17.4	16.0	2	15.7	12.5	1	8.0	17.5	0	0.00	0.17	83	11.6	11.6

The following comments may be made on this Summary table.

During the first part of the period the average birth rate was higher than that for England and Wales, during the second part it was lower, and during the period as a whole it was the same. This is in spite of the low proportion of women of child bearing age, the area comparability factor for births for 1971 being 1.13.

During the first part of the period the average stillbirth rate was lower than that for England and Wales, during the second part it was higher, and during the period as a whole it was lower.

During the first part of the period the average infant mortality rate was higher than that for England and Wales, during the second part it was lower, and during the period as a whole it was higher.

The number of pregnancies occurring is altogether too small to produce a maternal death rate of any significance, but it is creditable that not one maternal death occurred during the period 1950-69.

During both both parts of the period, and therefore during the period as a whole, the average death rate was lower than that for England and Wales. The proportion of elderly people is similar to that for England and Wales, the area comparability factor for deaths for 1971 being 1.03, and this death rate is evidence of a healthy population.

South Herefordshire

Vital Statistics

	Births			Stillbirths			Infant Deaths			Maternal Deaths			Deaths		
	Sth No.	Hfds Rate	E&W Rate	Sth No.	Hfds Rate	E&W Rate	Sth No.	Hfds Rate	E&W Rate	Sth No.	Hfds Rate	E&W Rate	Sth No.	Hfds Rate	E&W Rate
1950	639	16.7	15.9	18	27.4	22.6	13	20.3	29.6	0	0.00	0.86	472	12.3	11.6
1951	678	17.8	15.5	17	24.5	23.0	26	38.3	29.7	1	1.44	0.75	502	13.2	12.5
1952	654	17.3	15.3	18	26.8	22.7	13	19.9	27.6	0	0.00	0.67	444	11.8	11.3
1953	637	16.8	15.5	10	15.5	22.4	7	11.0	26.8	1	1.55	0.71	461	12.2	11.4
1954	575	15.1	15.2	15	25.4	23.5	22	38.3	25.4	0	0.00	0.65	444	11.7	11.3
1955	581	15.3	15.0	18	30.1	23.2	13	22.4	24.9	0	0.00	0.60	482	12.7	11.7
1956	601	15.9	15.7	19	30.6	22.9	15	25.0	23.7	0	0.00	0.52	458	12.1	11.7
1957	570	15.1	16.1	17	29.0	22.5	12	21.1	23.1	0	0.00	0.45	458	12.1	11.5
1958	586	15.5	16.4	13	21.7	21.5	14	23.9	22.5	0	0.00	0.43	456	12.1	11.7
1959	564	14.9	16.5	13	22.5	20.8	15	26.6	22.2	0	0.00	0.38	436	11.5	11.6
1960	609	16.1	17.2	16	25.6	19.8	6	9.9	21.8	0	0.00	0.39	464	12.3	11.5
1961	575	15.8	17.6	15	25.4	19.0	12	20.9	21.4	0	0.00	0.34	483	13.3	11.9
1962	608	16.6	18.0	9	14.6	18.1	16	26.3	21.7	0	0.00	0.35	439	12.0	11.9
1963	615	16.8	18.2	12	19.1	17.2	28	45.5	21.1	0	0.00	0.28	460	12.6	12.2
1964	615	16.6	18.5	9	14.4	16.3	17	27.6	19.9	0	0.00	0.26	438	11.8	11.3
1965	587	15.7	18.1	7	11.8	15.8	15	25.6	19.0	0	0.00	0.25	416	11.2	11.5
1966	584	15.6	17.7	8	13.5	15.3	9	15.4	19.0	0	0.00	0.26	436	11.7	11.7
1967	572	15.2	17.2	13	22.2	14.8	5	8.7	18.3	0	0.00	0.21	394	10.5	11.2
1968	532	14.1	16.9	12	22.1	14.3	6	11.3	18.3	0	0.00	0.24	441	11.7	11.9
1969	556	14.8	16.3	8	14.2	13.2	9	16.2	18.1	0	0.00	0.19	469	12.5	11.9
1970	483	12.9	16.0	7	14.3	13.0	4	8.3	18.2	1	2.04	0.18	442	11.8	11.7
1971	509	14.0	16.0	4	7.8	12.5	10	19.6	17.5	0	0.00	0.17	458	12.6	11.6

This table may be summarised as follows:

	Births			Stillbirths			Infant Deaths			Maternal Deaths			Deaths		
	Sth Total No.	Hfds Av Ann Rate	E&W Av Ann Rate	Sth Total No.	Hfds Av Ann Rate	E&W Av Ann Rate	Sth Total No.	Hfds Av Ann Rate	E&W Av Ann Rate	Sth Total No.	Hfds Av Ann Rate	E&W Av Ann Rate	Sth Total No.	Hfds Av Ann Rate	E&W Av Ann Rate
1950-59	6085	16.0	15.7	158	25.4	22.5	150	24.7	25.6	2	0.30	0.60	4613	12.2	11.6
1960-69	5853	15.7	17.6	109	18.3	16.4	123	20.7	19.9	0	0.00	0.28	4440	12.0	11.7
50-69	11938	15.9	16.6	267	21.8	19.4	273	22.7	22.7	2	0.15	0.44	9053	12.1	11.7
1970	483	12.9	16.0	7	14.3	13.0	4	8.3	18.2	1	2.04	0.18	442	11.8	11.7
1971	509	14.0	16.0	4	7.8	12.5	10	19.6	17.5	0	0.00	0.17	458	12.6	11.6

The following comments may be made on this Summary table:

During the first part of the period the average birth rate was higher than that for England and Wales, during the second part it was lower, and during the period as a whole it was lower. This is due to the low proportion of women of childbearing age, the area comparability factor for births for 1971 for all the districts being above unity.

During both parts of the period, and therefore during the period as a whole, the average stillbirth rate was higher than that for England and Wales.

During the first part of the period the average infant mortality rate was lower than that for England and Wales, during the second part it was higher, and during the period as a whole it was the same.

The number of pregnancies occurring is altogether too small to produce a maternal death rate of any significance, but the two deaths which occurred during the period as a whole produced an average rate corresponding to 34.1% of that for England and Wales.

During both parts of the period, and therefore during the period as a whole, the average death rate was higher than that for England and Wales. This is due to the high proportion of elderly people, the area comparability factor for deaths for 1971 for three of the four districts being below unity.

Dore R.D.

Causes of Death

	Lung Cancer			Other Cancer			Cerebro Vascular Disease			Cardio Vascular Disease			Other Cardiac Disease		
	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate	Dore No.	RD Rate	E&W Rate
1950	1	0.12	0.28	11	1.27	1.67	10	1.15	1.48	5	0.58	1.25	22	2.53	2.21
1951	1	0.12	0.30	14	1.62	1.66	9	1.04	1.56	10	1.16	1.33	13	1.50	2.34
1952	0	0.00	0.32	12	1.43	1.67	14	1.67	1.58	7	0.83	1.40	17	2.03	2.00
1953	4	0.48	0.34	12	1.44	1.65	10	1.20	1.54	9	1.08	1.42	20	2.40	1.93
1954	3	0.36	0.37	9	1.08	1.67	11	1.32	1.63	5	0.60	1.53	13	1.56	1.87
1955	3	0.36	0.39	18	2.16	1.67	12	1.44	1.67	7	0.84	1.61	19	2.28	1.88
1956	3	0.36	0.41	11	1.32	1.67	10	1.20	1.67	6	0.72	1.70	15	1.80	1.82
1957	1	0.12	0.42	21	2.53	1.67	6	0.72	1.64	8	0.96	1.72	18	2.17	1.70
1958	2	0.24	0.44	12	1.45	1.68	18	2.17	1.69	10	1.20	1.86	17	2.05	1.72
1959	4	0.48	0.46	10	1.21	1.68	9	1.09	1.66	7	0.85	1.87	7	0.85	1.58
1960	1	0.12	0.48	19	2.29	1.68	11	1.32	1.67	10	1.20	2.01	15	1.81	1.55
1961	1	0.13	0.49	18	2.30	1.67	12	1.53	1.67	8	1.02	2.07	24	3.06	1.57
1962	4	0.51	0.51	11	1.39	1.67	7	0.89	1.68	12	1.52	2.19	15	1.90	1.50
1963	1	0.13	0.52	16	2.05	1.66	13	1.67	1.71	9	1.15	2.29	16	2.05	1.47
1964	3	0.39	0.54	13	1.68	1.67	13	1.68	1.56	13	1.68	2.24	17	2.19	1.25
1965	0	0.00	0.55	16	2.07	1.67	9	1.16	1.64	10	1.29	2.38	12	1.55	1.23
1966	1	0.13	0.56	17	2.20	1.69	14	1.81	1.64	17	2.20	2.39	13	1.68	1.23
1967	3	0.39	0.58	7	0.90	1.70	11	1.42	1.59	16	2.07	2.67	5	0.65	0.82
1968	1	0.13	0.59	24	3.07	1.72	14	1.79	1.65	11	1.41	2.85	11	1.41	0.82
1969	3	0.39	0.61	15	1.94	1.74	14	1.81	1.63	18	2.32	2.86	7	0.90	0.78
1970	2	0.26	0.62	22	2.85	1.74	12	1.56	1.62	21	2.72	2.84	11	1.43	0.75
1971	4	0.56	0.63	10	1.39	1.76	11	1.53	1.64	23	3.21	2.93	9	1.26	0.73

This table may be summarised as follows:

	Lung Cancer			Other Cancer			Cerebro Vascular Disease			Cardio Vascular Disease			Other Cardiac Disease		
	Dore Total No.	RD Av Ann Rate	E&W Av Ann Rate	Dore Total No.	RD Av Ann Rate	E&W Av Ann Rate	Dore Total No.	RD Av Ann Rate	E&W Av Ann Rate	Dore Total No.	RD Av Ann Rate	E&W Av Ann Rate	Dore Total No.	RD Av Ann Rate	E&W Av Ann Rate
50-59	22	0.26	0.37	130	1.55	1.67	109	1.30	1.61	74	0.88	1.57	161	1.92	1.91
60-69	18	0.23	0.54	156	1.99	1.69	118	1.51	1.64	124	1.59	2.40	135	1.72	1.22
50-69	40	0.25	0.46	286	1.77	1.68	227	1.40	1.63	198	1.23	1.98	296	1.82	1.56
1970	2	0.26	0.62	22	2.85	1.74	12	1.56	1.62	21	2.72	2.84	11	1.43	0.75
1971	4	0.56	0.63	10	1.39	1.76	11	1.53	1.64	23	3.21	2.93	9	1.26	0.73

Death rates from the four main causes of death, responsible for 66.2% of all deaths in England and Wales in 1971, with death rates from cancer subdivided into those from lung cancer and those from other cancer, are shown.

Death rates from lung cancer were lower than those for England and Wales, due to different smoking habits in rural areas, and did not show the usual dramatic rise due to increased smoking which is seen in lung cancer death rates, but not in other cancer death rates as smoking is not the cause of this.

Death rates from other cancer were higher than those for England and Wales, although the proportion of elderly people is similar.

Death rates from cerebrovascular disease were lower than those for England and Wales, although the proportion of elderly people is similar.

Death rates from cardiovascular disease were lower than those for England and Wales, although the proportion of elderly people is similar.

Death rates from other cardiac disease were higher than those for England and Wales, although the proportion of elderly people is similar.

These two latter rates must however be taken together, as the shift from one to the other is partly due to a change, which has been delayed locally, in the fashion of diagnosis.

South Herefordshire

Causes of Death

	Lung Cancer			Other Cancer			Cerebro Vascular Disease			Cardio Vascular Disease			Other Cardiac Disease		
	Sth Hfds No.	Sth Hfds Rate	E&W Rate	Sth Hfds No.	Sth Hfds Rate	E&W Rate	Sth Hfds No.	Sth Hfds Rate	E&W Rate	Sth Hfds No.	Sth Hfds Rate	E&W Rate	Sth Hfds No.	Sth Hfds Rate	E&W Rate
1950	5	0.13	0.28	70	1.83	1.67	73	1.91	1.48	39	1.02	1.25	104	2.72	2.21
1951	7	0.18	0.30	65	1.71	1.66	62	1.63	1.56	51	1.34	1.33	84	2.21	2.34
1952	5	0.13	0.32	57	1.51	1.67	55	1.46	1.58	38	1.01	1.40	100	2.65	2.00
1953	9	0.24	0.34	65	1.72	1.65	56	1.48	1.54	53	1.40	1.42	106	2.80	1.93
1954	6	0.16	0.37	55	1.45	1.67	65	1.71	1.63	48	1.26	1.53	87	2.29	1.87
1955	12	0.32	0.39	71	1.87	1.67	74	1.95	1.67	52	1.37	1.61	76	2.00	1.88
1956	9	0.24	0.41	65	1.72	1.67	68	1.80	1.67	35	0.93	1.70	89	2.35	1.82
1957	8	0.21	0.42	72	1.91	1.67	56	1.48	1.64	49	1.30	1.72	92	2.44	1.70
1958	12	0.32	0.44	49	1.30	1.68	71	1.88	1.69	63	1.67	1.86	71	1.88	1.72
1959	10	0.26	0.46	67	1.77	1.68	65	1.72	1.66	49	1.30	1.87	67	1.77	1.58
1960	14	0.37	0.48	75	1.98	1.68	75	1.98	1.67	60	1.59	2.01	65	1.72	1.55
1961	17	0.47	0.49	72	1.98	1.67	68	1.87	1.67	57	1.57	2.07	78	2.15	1.57
1962	17	0.46	0.51	56	1.53	1.67	62	1.69	1.68	62	1.69	2.19	60	1.64	1.50
1963	11	0.30	0.52	68	1.86	1.66	69	1.88	1.71	61	1.67	2.29	65	1.78	1.47
1964	12	0.32	0.54	56	1.51	1.67	65	1.76	1.56	79	2.13	2.24	55	1.49	1.25
1965	17	0.46	0.55	64	1.72	1.67	64	1.72	1.64	78	2.09	2.38	49	1.31	1.23
1966	14	0.37	0.56	66	1.76	1.69	74	1.98	1.64	82	2.19	2.39	65	1.74	1.23
1967	18	0.48	0.58	62	1.65	1.70	68	1.81	1.59	90	2.39	2.67	44	1.17	0.82
1968	17	0.45	0.59	79	2.10	1.72	70	1.86	1.65	76	2.02	2.85	42	1.12	0.82
1969	19	0.51	0.61	70	1.86	1.74	72	1.92	1.63	112	2.98	2.86	48	1.28	0.78
1970	22	0.59	0.62	63	1.69	1.74	69	1.85	1.62	86	2.30	2.84	55	1.47	0.75
1971	17	0.47	0.63	58	1.60	1.76	81	2.23	1.64	89	2.45	2.93	46	1.27	0.73

This table may be summarised as follows:

	Lung Cancer			Other Cancer			Cerebro Vascular Disease			Cardio Vascular Disease			Other Cardiac Disease		
	Sth Hfds Total No.	Sth Hfds Av Ann Rate	E&W Av Ann Rate	Sth Hfds Total No.	Sth Hfds Av Ann Rate	E&W Av Ann Rate	Sth Hfds Total No.	Sth Hfds Av Ann Rate	E&W Av Ann Rate	Sth Hfds Total No.	Sth Hfds Av Ann Rate	E&W Av Ann Rate	Sth Hfds Total No.	Sth Hfds Av Ann Rate	E&W Av Ann Rate
50-59	83	0.22	0.37	636	1.68	1.67	645	1.70	1.61	477	1.26	1.57	876	2.31	1.91
60-69	156	0.42	0.54	668	1.80	1.69	687	1.85	1.64	757	2.03	2.40	571	1.54	1.22
50-69	239	0.32	0.46	1304	1.74	1.68	1332	1.77	1.63	1234	1.65	1.98	1447	1.93	1.56
1970	22	0.59	0.62	63	1.69	1.74	69	1.85	1.62	86	2.30	2.84	55	1.47	0.75
1971	17	0.47	0.63	58	1.60	1.76	81	2.23	1.64	89	2.45	2.93	46	1.27	0.73

Death rates from the four main causes of death, responsible for 66.2% of all deaths in England and Wales in 1971, with death rates from cancer subdivided into those from lung cancer and those from other cancer, are shown.

Although death rates from lung cancer were lower than those for England and Wales, due to different smoking habits in rural areas, they showed the same dramatic rise due to increased smoking, in contrast with death rates from other cancer which did not rise as smoking is not the cause of this.

Death rates from other cancer were higher than those for England and Wales, due to the high proportion of elderly people.

Death rates from cerebrovascular disease were higher than those for England and Wales, due to the high proportion of elderly people.

Death rates from cardiovascular disease were lower than those for England and Wales, in spite of the high proportion of elderly people.

Death rates from other cardiac disease were higher than those for England and Wales, due to the high proportion of elderly people.

These two latter death rates must however be taken together, as the shift from one to the other is partly due to a change, which has been delayed locally, in the fashion of diagnosis.

Section B

General Provision of Health Services for the Area

Natioanl Health Service Act 1946

Part II

Hospital and Specialist Services

Section 3. Hospital and Specialist Services

These services are the responsibility of the Herefordshire Hospital Management Committee, Eign Street, Hereford. Telephone Hereford 2012

Part III

Local Health Authority Services

Section 21	Health Centres
Section 22	Care of Mothers and Young
Section 23	Midwifery
Section 24	Health Visiting
Section 25	Home Nursing
Section 26	Vaccination and Immunisation
Section 27	Ambulance Services
Section 28	Prevention of Illness, Care and After Care

These services are the responsibility of the Herefordshire County Health Department, Bridge Street, Hereford. Telephone Hereford 4281

Part IV

General Medical and Dental, Pharmaceutical, and Supplementary Ophthalmic Services

Section 33	General Medical Services
Section 38	Pharmaceutical Services
Section 40	General Dental Services
Section 41	Supplementary Ophthalmic Services

These services are the responsibility of the Herefordshire Executive Council, St. James Road, Hereford. Telephone 5606

Laboratory Services

Public Health Laboratory Services

These services are the responsibility of the Public Health Laboratory, County Hospital, Hereford. Telephone Hereford 4696.

Specimens from South Herefordshire were reported on during the year as follows:

Water	584
Faeces	110
Milk	96
Food	3
	793

Section C

Infectious and Other Notifiable Diseases

Dore R.D.

Infectious Diseases

	Measles (excluding rubella)	
	M	F
Under 1 year	1	3
1-	1	3
2-	1	1
3-	-	-
4-	-	2
5-	9	6
10-	-	2
15-	-	-
25 and over	1	-
Age unknown	-	-
Total	13	17

	Whooping Cough	
	M	F
Under 3 months	-	-
3-	-	-
6-	-	-
9-	1	-
1-year	2	-
2-	2	2
5-	1	1
10-	-	-
15-	-	-
20-	-	-
25-	-	-
35-	-	-
45-	-	-
55-	-	-
65-	-	-
75 and over	-	-
Age unknown	-	-
Total	6	3

	Infective Jaundice	
	M	F
Under 1 year	-	-
1-	-	-
2-	-	-
5-	-	-
10-	-	-
15-	-	-
20-	-	1
25-	-	-
35-	-	-
45-	-	-
55-	-	-
65-	-	-
75 and over	-	-
Age unknown	-	-
Total	-	1

Infectious and Other Notifiable Diseases

South Herefordshire

Infectious Diseases

	Measles (excluding rubella)		Scarlet Fever	
	M	F	M	F
Under 1 year	8	4	-	-
1-	21	18	-	-
2-	16	18	-	-
3-	22	15	-	-
4-	23	24	-	-
5-	99	80	-	2
10-	6	15	-	-
15-	1	5	-	-
25 and over	2	1	-	-
Age unknown	-	-	-	-
Total	198	180		2

	Food Poisoning	
	M	F
Under 5 years	3	1
5-	2	2
15-	1	1
45-	-	-
65 and over	-	-
Age unknown	-	-
Total	6	4

	Whooping Cough	
	M	F
Under 3 months	-	-
3-	1	2
6-	-	1
9-	1	1
1- year	5	-
2-	6	7
5-	8	8
10-	-	1
15-	-	-
20-	-	-
25-	1	1
35-	-	2
45-	-	-
55-	-	-
65-	-	-
75 and over	-	-
Age unknown	-	-
Total	22	23

	Infective Jaundice		Tuberculosis Respiratory	
	M	F	M	F
Under 1 year	-	-	-	-
1-	-	-	-	-
2-	-	-	-	-
5-	1	-	-	-
10-	-	-	-	-
15-	-	1	-	-
20-	2	1	-	-
25-	-	-	1	-
35-	-	-	-	-
45-	-	-	-	-
55-	-	-	-	-
65-	-	-	1	-
75 and over	-	-	-	-
Age unknown	-	-	-	-
Total	3	2	2	-

Dore R.D.

Tuberculosis

	Notifications							Deaths						
	Pulmonary			Non-Pulmonary			Total	Pulmonary			Non-Pulmonary			Total
	Male	Female	Total	Male	Female	Total		Male	Female	Total	Male	Female	Total	
1950	4	1	5	2	1	3	8	1		1				1
1951	3	3	6	1		1	7	2	1	3		1	1	4
1952	2	4	6	2		2	8	2		2				2
1953	3		3				3	3	2	5				5
1954	5	1	6				6	1		1				1
1955	1	3	4		1	1	5							
1956		1	1		1	1	2							
1957	3	1	4	1		1	5							
1958	1	2	3	1		1	4	1	1	2				2
1959														
1960					1	1	1							
1961	2		2				2							
1962		2	2				2		1	1				1
1963	1	1	2				2							
1964														
1965								1		1				1
1966														
1967	2		2				2							
1968	2		2				2							
1969	2	1	3				3							
1970														
1971														

This table may be summarised as follows:

Average Annual Numbers

	Notifications							Deaths						
	Pulmonary			Non-Pulmonary			Total	Pulmonary			Non-Pulmonary			Total
	Male	Female	Total	Male	Female	Total		Male	Female	Total	Male	Female	Total	
50-59	2.2	1.6	3.8	0.7	0.3	1.0	4.8	1.0	0.4	1.4		0.1	0.1	1.5
60-69	0.9	0.4	1.3		0.1	0.1	1.4	0.1	0.1	0.2				0.2
50-69	1.6	1.0	2.6	0.4	0.2	0.6	3.1	0.6	0.3	0.8		0.1	0.1	0.9
1970														
1971														

The following comments may be made on this Summary table:

All numbers were lower in 1960-69 than in 1950-59 except Male Non-Pulmonary eaths.

Although there were fewer Female Pulmonary notifications than Male Pulmonary otifications in 1950-59 the proportionate fall in Pulmonary notifications in 1960-69 as compared with 1950-59 was still greater in Females than in Males.

So far as any conclusions may be drawn from such small numbers the following onclusions may be drawn.

Tuberculosis is on the decline.

Pulmonary Tuberculosis, but not Non-Pulmonary Tuberculosis, is essentially nd increasingly a disease of Males. It is also essentially a disease of iddle-aged Males. Medical opinion is that this is due to the breakdown of a hildhood infection caused by smoking.

South Herefordshire

Tuberculosis

	Notifications							Deaths						
	Pulmonary			Non-Pulmonary			Total	Pulmonary			Non-Pulmonary			Total
	Male	Female	Total	Male	Female	Total		Male	Female	Total	Male	Female	Total	
1950	23	6	29	7	2	9	38	9	3	12	1		1	13
1951	26	20	46	4	5	9	55	4	3	7		2	2	9
1952	11	17	28	5	3	8	36	8		8	1		1	9
1953	12	8	20		1	1	21	8	3	11				11
1954	13	13	26	3	4	7	33	3	1	4				4
1955	10	8	18	1	2	3	21	1	2	3				3
1956	16	6	22	2	3	5	27	4	1	5		1	1	6
1957	17	5	22	3		3	25	3		3				3
1958	9	9	18	2	2	4	22	3	3	6	1		1	7
1959	8	3	11				11	3	1	4				4
1960	2	3	5		3	3	8							
1961	7	4	11		3	3	14	2	1	3				3
1962	2	5	7	1		1	8	2	1	3				3
1963	5	2	7				7	2		2				2
1964	5		5	2	1	3	8	4		4				4
1965	7	3	10		2	2	12	2		2	1	1	2	4
1966	2	2	4		1	1	5							
1967	5	4	9	1	1	2	11	1	1	2				2
1968	6		6	1		1	7	2		2				2
1969	3	2	5				5		1	1				1
1970	1	1	2				2		2	2				2
1971	2		2				2							

This table may be summarised as follows:

Average Annual Numbers

	Notifications							Deaths						
	Pulmonary			Non-Pulmonary			Total	Pulmonary			Non-Pulmonary			Total
	Male	Female	Total	Male	Female	Total		Male	Female	Total	Male	Female	Total	
50-59	14.5	9.5	24.0	2.7	2.2	4.9	28.9	4.6	1.7	6.3	0.3	0.3	0.6	6.9
60-69	4.4	2.5	6.9	0.5	1.1	1.6	8.5	1.5	0.4	1.9	0.1	0.1	0.2	2.1
50-69	9.5	6.0	15.5	1.6	1.7	3.3	18.7	3.1	1.1	4.1	0.2	0.2	0.4	4.5
1970	1	1	2				2		2	2				2
1971	2		2				2							

The following comments may be made on the Summary table:

All numbers were lower in 1960-69 than in 1950-59.

All numbers for Males were higher than the corresponding numbers for Females except Male Non-Pulmonary notifications in 1960-69 and Male Non-Pulmonary deaths in 1950-59 and 1960-69.

Although there were fewer Female Pulmonary notifications than Male Pulmonary notifications and fewer Female Pulmonary deaths than Male Pulmonary deaths in 1950-59 the proportionate fall in Pulmonary notifications and Pulmonary deaths in 1960-69 as compared with 1950-59 was still greater in Females than in Males.

So far as any conclusions may be drawn from such small numbers the following conclusions may be drawn.

Tuberculosis is on the decline.

Pulmonary Tuberculosis but not Non-Pulmonary Tuberculosis is essentially and increasingly a disease of Males. It is also essentially a disease of middle-aged Males. Medical opinion is that this is due to the breakdown of a childhood infection caused by smoking.

Section D Sanitary Circumstances of the Area

Water Supply

The water supply of the area has been satisfactory in quality and quantity with the exception of the high level local supply at Clifford, where some shortage has been experienced in times of low flow from the source. This shortage was made good by tankering to the service reservoir.

Where unsatisfactory bacteriological results have been obtained on the samples taken in the district, these have been investigated and action taken on the findings. This has usually entailed a visit to the property to check up conditions, a check on the chlorination at sources, and flushing out of dead end mains followed by resampling.

1285 houses (3600 population) are supplied from public water mains direct to the houses as follows:-

Abbeydore	44	Madley	178
Clifford	112	Newton	4
Cusop	91	Orcop	23
Dorstone	41	Peterchurch	116
Ewyas Harold	150	Rowlstone	13
Kenderchurch	14	St. Devereux	9
Kentchurch	38	Thruxton	6
Kilpec	31	Turnastone	2
Kingstone	258	Vowchurch	43
Llanveynoe	1	Walterstone	14
Longtown	88	Wormbridge	9
		Total	1285

The fluoride content of the water supply is less than 0.1 part per million.

Sewerage and Sewage Disposal

Longtown

A preliminary report on a sewerage and sewage disposal scheme for Longtown was presented to the Council by the Consulting Engineers on 31st January 1962. Three alternative schemes for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock, Longtown and Upper, Middle, and Lower Ponthendre, and Longtown only, with a different site for the sewage disposal works for each scheme, were put forward in the report. The Council decided on the 12th April 1962 to proceed with the scheme for Sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock.

However the owner of the land on which it was proposed to site the Sewage disposal works was not prepared to sell this to the Council, and suggested three other sites on his land which were less useful to him. These sites were investigated by the Consulting Engineers and found to be unsatisfactory and they recommended in their report dated 2nd April 1963 that the Council should proceed with the scheme for sewerage of Longtown and Upper, Middle, and Lower Ponthendre, with the site for the sewage disposal works on land not belonging to the owner of the four alternative sites for the sewage disposal works for the scheme for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock.

Nevertheless the Council on 9th May 1963 reaffirmed their decision to proceed with the scheme for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock, with the site for the sewage disposal works on land which the owner was not prepared to sell to the Council. The District Valuer was asked to negotiate for the purchase of the site with the owner, but was unsuccessful, and the Council on the 9th July 1964 made a Compulsory Purchase Order for the site. A Public Enquiry

into/

into the matter of the purchase of the site was held by an Inspector of the Ministry of Housing and Local Government on 15th December 1965. At the Enquiry the owner of the site again put forward the three other sites which the Consulting Engineers had already dismissed and the Inspector refused to confirmthe Compulsory Purchase Order and recommended that the Council negotiate with the owner for the purchase of one or other of two of these sites.

Notwithstanding that the owner had himself put these sites forward and that the Inspector had recommended that the Council negotiate with him for the purchase of one of them, permission to enter on the land to survey them was refused by the owner and a Formal Notice had to be served on him in order to obtain entry. The survey was finally carried out on 3rd April 1967 and the Consulting Engineers recommended one of these sites in their report dated 20th April 1967. This recommendation was accepted by the Council on 1st June 1967.

However protracted negotiations with the owner eventually brought to light that he was willing to sell the land only if a property belonging to him which it would be extremely difficult to sewer was included in the scheme. At this point the Council understandably lost heart, and the matter fell into abeyance until a series of complaints of nuisance led to the Acting Medical Officer of Health submitting a Report to the Council on 16th August 1968, in which he made the same recommendation as that made by the Consulting Engineers in their report dated 2nd April 1963, that the Council should proceed with the scheme for sewerage of Longtown and Upper, Middle, and Lower Ponthendre, with the site for the sewage disposal works on land not belonging to the owner of the four alternative sites for the sewage disposal works for the scheme for sewerage of Longtown, Upper, Middle, and Lower Ponthendre, and Clodock. This recommendation was accepted by the Council on 5th September 1968.

The Consulting Engineer in their report dated 5th December 1968 on this scheme put forward a fourth scheme for sewerage of Longtown and Upper Ponthendre only, with a further site for the sewage disposal works, and an alternative site for the sewage disposal works for the third scheme serving Longtown only. The Council decided on 27th January 1969 to proceed with the scheme for sewerage of Longtown only, and on 27th May 1969 the Clerk was authorised to write to the owners of the land required for the sewage disposal works. On 30th June 1969 the Clerk reported that the owners of the land had replied that they were not prepared to sell the land, and on the 28th July 1969 the Council decided to have other sites investigated.

The Consulting Engineers put forward a further site for the sewage disposal works this being the sixth site for the sewage disposal works put forward by the Consulting Enginners, and to which the three unsatisfactory sites put forward by the owner of one of these may be added. The owner of the sixth site expressed his willingness to sell it to the Council, planning permission for its use for a sewage disposal works was obtained from the County Planning Authority, and the matter of negotiations for the purchase of the site was put in the hands of the District Valuer on 24th October 1969. On the 28th June 1971 the Council were informed that the District Valuer had agreed a price with the owner, on 27th September 1971 that the Consultant Engineers had submitted a revised estimate of the cost, and on the 30th December 1971 that the scheme had been placed in Category A of locally determined projects under the new loan sanction procedure for the 1972-73 loan allocation.

There on the 31st December 1971 this matter of ten years, four Consulting Engineers' Reports, four schemes, and nine sites for the sewage disposal works, rested. Meanwhile the nuisance in Longtown continues. The villages lies on an outcrop of Old Red Sandstone, which is dense and hard, and the land therefore is unsuitable for septic tanks. There are frequent complaints of nuisance from effluent from septic tanks and foul water from sink wastes flowing into the roadside ditches, and even along the road, and this is aggravated by the fact that there is a public water supply, which increases greatly the volume of effluents and sink wastes.

Emigration from the District is at a disastrous rate. During the period 1950 - 69 births exceeded deaths by 1033, but the population fell from 8589 to 7750, so net emigration was 1872. The Black Mountain foothills are the most beautiful part of Herefordshire, with country of the same quality as that in the Brecon Beacons National Park. Provision of essential services could lead to a dramatic change from the setting up of recreational and retirement facilities based on Longtown.

Peterchurch Phase 2

As the village of Dorstone falls to be sewered for the first time as part of this scheme, and because of the need to cope with current development and the heavy pressure for further development in Peterchurch, it is hoped that 1972 will see the commencement of work on this Scheme.

Kingstone-Madley

This Scheme which is dependent upon a sewage disposal works constructed to serve a former military establishment, and which works are too large for the purpose for which they are being used, beyond the resources of the Council to maintain, inefficient, and in a poor state of repair, has been under severe pressure for a considerable time because of continual housing development, both Council and private. It is of the utmost importance that the necessary finance to allow the scheme to proceed should be found at the earliest opportunity.

Kilpeck

Proposed council housing development in the village cannot proceed until the sewerage and sewage disposal scheme is approved.

Rivers and Streams

Sampling of water from rivers and streams is carried out by the Wye River Authority. The Authority also samples from time to time sewage effluent discharging into streams.

Closet Accommodation

42 Improvement Grants, comprising 29 Standard Grants and 13 Discretionary Grants, were made during the year, and in most cases the work included conversion from pail closets or privies to water closets. A few water closets were constructed otherwise than with the aid of such grants.

It is estimated that 80% of properties now have a water carriage drainage system. Of these 30% are on main sewers and 70% have septic tank drainage.

Public Cleansing

The private contract for refuse collection was renewed again this year. No major extensions were made to the service.

Public Health Inspection of the Area

The tabular statement furnished by the Public Health Inspector under Article 25(20) of the Public Health Officers' Regulations 1959

Bakehouses	31	Food Hygiene Regulations	201
Butchers	25	Housing Survey	136
Caravan Sites	18	Infectious Disease	4
Cars on Common Land	4	Licensed Premises	26
Complaints	75	Offices, Shops and Rly Premises	39
Council Houses	66	Petroleum Stores	36
Dog Kennels	2	Refuse Collection	59
Drainage into Ditches and Water Courses	46	Refuse Disposal	27
Drain Tests	60	Rodent Control	16
Factories with mechanical power	8	Sewage Disposal Works	209
		Smoke Nuisance	6
		Water Supplies and Sampling	41
		Total	1135

Shops and Offices

There are 19 premises listed under the Offices, Shops and Railway Premises Act 1963

43 visits were made to premises registered under the Act during the year.

No action under the Act was necessary during the year.

Camping Sites

10 Sites in the area were used for camping purposes during the year.

No licences were issued by the Local Authority under Section 269 of the Public Health Act 1936.

The estimated maximum number of campers resident in the area at one time during the summer season was 220.

Smoke Abatement

Occasional complaints which were received during the year were dealt with satisfactorily on an informal basis.

Public Swimming Baths

There are no public swimming baths in the district but six schools at Clifford, Ewyas Harold, Kingstone, Longtown, and Peterchurch (2) have learner pools.

The pH value and chlorine content of the bathing water is monitored from time to time and in addition samples of the water are submitted to the Public Health Laboratory for bacteriological examination.

Section E - Housing

New Houses

Number of houses completed during the year:

(a) by private enterprise ... 33
(b) by the Local Authority ... 32

Number of houses in course of erection at the end of the year

(a) by private enterprise ... 11
(b) by the Local Authority ... Nil

Housing Act 1957 Part IV Abatement of Overcrowding

(a) (a) Number of dwellings overcrowded at the end of year ... Nil

(b) (b) Number of new cases of overcrowding reported during the year ... 2

(c) (i) Number of cases of overcrowding relieved during the year ... 2
(ii) Number of persons concerned in such cases ... 16

(d) Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ... Nil

Houses in Clearance Areas and Unfit Houses Elsewhere

UNFIT HOUSES CLOSED during the year in pursuance of Closing Orders or Undertakings	Under Sections 16(4), 17(1) and 35(1) Housing Act 1957 and Section 26 Housing Act 1961	No. of houses ...	11
		No. of separate dwellings contained therein ...	11
	Under Sections 17(3) and 26 Housing Act 1957	No. of houses ...	Nil
	Parts of Buildings closed under Section 18 Housing Act 1957	No. of dwellings ...	Nil
Number of PERSONS DISPLACED during year	From houses to be demolished in or adjoining clearance areas	...	Nil
	From houses to be demolished not in or adjoining clearance areas	...	Nil
	From houses to be closed	...	14
	From parts of buildings to be closed	...	Nil
Number of FAMILIES DISPLACED during year	From houses to be demolished in or adjoining clearance areas	...	Nil
	From houses to be demolished not in or adjoining clearance areas	...	Nil
	From houses to be closed	...	5
	From parts of buildings to be closed	...	Nil

Section F Inspection and Supervision of Food

The number of Food Premises in the area, by type of business

Bakers	4
Butchers	3
Grocers	29
Licensed Premises	28
Total	64

The number of Food Premises, by type, registered under Section 16 of the Food and Drugs Act 1955, or under Local Acts, and the number of Dairies registered under the Milk and Dairies (General) Regulations 1959

Ice Cream Purveyors	22

The number of inspections of registered Food Premises

Bakehouses	53
Butchers	44
Grocers	77
Licensed Premises	23
Total	197

The method of disposal of condemned food

Condemned food is disposed of by burial.

Reference to the Ice Cream (Heat Treatment etc.) Regulations 1959-63

There are no premises which are required to be registered under these Regulations.

Details of Food Premises subject to the Food Hygiene (General) Regulations 1960 grouped in categories of trade carried on in them, and including the following information for each category separately

(a) the number of premises
(b) the number of premises fitted to comply with Regulation 16
(c) the number of premises to which Regulation 19 applies
(d) the number of premises fitted to comply with Regulation 19

Bakers	4
Butchers	3
Grocers	29
Licensed Premises	28
Total	64

95% of premises are fitted to comply with Regulation 16. Regulation 19 applies to 95% of premises and all 95% of premises to which the Regulation applies are fitted to comply with it.

Meat

A tabular statement for the inclusion of information about the post mortem inspection of animals in the form provided.

Carcases and Offal inspected and condemned in whole or in part

There is no slaughterhouse in the district.

Factories Act 1961

Prescribed Particulars on the Administration of the Factories Act 1961

Part I of the Act

1. Inspections for purposes and provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of Inspections (3)	Number of Written Notices (4)	Number of Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	-	-	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	10	8	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	-	-	-	-
Total	10	8	-	-

2. Cases in which DEFECTS were found

Particulars (1)	Number of cases in which defects were found: Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	Referred by H.M. Inspector (5)	Number of cases in which prosecutions were instituted (6)
Want of cleanliness	-	-	-	-	-
Overcrowding	-	-	-	-	-
Unreasonable temp.	-	-	-	-	-
Inadequate ventilation	-	-	-	-	-
Ineffective drainage of floors	-	-	-	-	-
Sanitary Conveniences					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	-	-	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	-